

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------------------------|--------|----------|
| FEE DETERMINATION | <i>[Handwritten initials]</i> | 70591 | 8/16 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>[Handwritten initials]</i> | 66293 | 09/12/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
+ Restricted O Objected

Best Available Copy

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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